Image# 27940081099

S	CHEDULE B (FEC Form 3)	Use seperate schedule(s)		NUMBER: PAGE 6/6	
ITEMIZED DISBURSEMENTS			(check onl) 21b 27	y one) 22 X 23 24 25 26 28a 28b 28c 29 30b	
	y Information copied from such Reports an for commercial purposes, other than using				
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
/	Novartis Vaccines and Diagnostics				
	Full Name (Last, First, Middle Initial)			Transaction ID: 1779090612073632064	
۹.	Citizens for Harkin	Date of Disbursement			
	Mailing Address PO Box 811			12 M / D D 7 / Y 2006 Y	
	City	State Zip Code		Amount of Each Disbursement this Period	
	Des Moines	IA 50304		2000.00	
	Purpose of Disbursement 2008 Primary			2000.00	
	Candidate Name		Category/		
	Harkin Tom		Туре		
		Disbursement For: 2008			
	X Senate President	X Primary General Other (specify) ▼			
	State: IA District: 00	Cirier (specify)			

SUBTOTAL of Disbursements This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	<u> </u>	2000.00